

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) IVGN 174.1 DIV					
<p style="text-align: center;"><u>CERTIFICATE OF EFS WEB TRANSMISSION</u></p> <p>Date: August 28, 2009</p> <p>I hereby certify that this correspondence and any other attachment noted on the automated Acknowledgment Receipt, is being transmitted from within the Pacific Time zone to the Commissioner for Patents via the EFS Web server on the date indicated above.</p> <p style="text-align: center;">_____ Mila T. Kasan (Name) _____ /Mila T. Kasan/ (Signature)</p>	<p>In re Application of Richard FIKE et al.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Application Number 09/606,314</td> <td style="width: 40%; padding: 2px;">Filed June 29, 2000</td> </tr> </table> <p>For Dry Powder Cell and Cell Culture Reagents and Methods of Production Thereof</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 2px;">Group Art Unit 1657</td> <td style="width: 33%; padding: 2px;">Examiner Schuberg, Laura J.</td> <td style="width: 34%; padding: 2px;">E-File</td> </tr> </table>		Application Number 09/606,314	Filed June 29, 2000	Group Art Unit 1657	Examiner Schuberg, Laura J.	E-File
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<p>This is a request under the provisions of 37 CFR § 1.136(a) to extend the period for filing a response in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <p><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) (490) \$ <u>490.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-3994. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table style="width: 100%; margin-top: 20px;"> <tr> <td style="width: 50%; text-align: center;"> August 28, 2009 _____ Date </td> <td style="width: 50%; text-align: center;"> /Daphne Reddy/ _____ (Signature) </td> </tr> <tr> <td colspan="2" style="text-align: center; margin-top: 10px;"> Daphne Reddy, Reg. No. 53,507 _____ (Typed or printed name / Reg. No.) </td> </tr> </table>			August 28, 2009 _____ Date	/Daphne Reddy/ _____ (Signature)	Daphne Reddy, Reg. No. 53,507 _____ (Typed or printed name / Reg. No.)		
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